

Disclosure Report Cover

Amendment

☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information			
a. Full Name		c. ID Number	
SIMPSON FOR COMMISSIONER			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
P.O. BOX 1011 WAXHAW, NC 28173-9876		01/03/2019	
		e. Phone Number	
		(704) 302-2940	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2018	10/21/2018	12/31/2018	CINDY JACKSON
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Legal Expense Fund		Municipal State/County Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Quarterly <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Pre-primary <input type="checkbox"/> First <input type="checkbox"/> Final <input type="checkbox"/> Pre-election <input type="checkbox"/> Second <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Third <input type="checkbox"/> Annual <input type="checkbox"/> Semi-annual <input type="checkbox"/> Fourth <input type="checkbox"/> Special <input type="checkbox"/> Mid Year <input type="checkbox"/> Semi-annual <input type="checkbox"/> Year End <input type="checkbox"/> Mid Year <input type="checkbox"/> Final <input type="checkbox"/> Year End <input type="checkbox"/> Special <input type="checkbox"/> Final <input type="checkbox"/> <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Presidential Election Year Candidates Fund <input type="checkbox"/> NC Public Campaign Financing Fund <input type="checkbox"/> Other:			
8. Number of Fundraisers this Report			
0			
3. Account Information		3. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
BB&T			
b. Purpose	c. Account Code	b. Purpose	c. Account Code
FOR CAMPAIGN RELATED ACTIVITY	1126		
	d. Period Begin Balance		d. Period Begin Balance
	\$ 508.68		\$
<div style="border: 1px solid red; padding: 5px; display: inline-block;"> RECEIVED JAN 07 2019 Union Co. Board of Elections </div>			
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board			
<u>Cindy H. Jackson</u> Printed Name of Signer		<u>Cindy H. Jackson</u> Signature of Appointed Treasurer	
		01/03/2019 Date	
FOR OFFICE USE ONLY			
Date Received:	01/07/19	Employee:	J. Keyes
Date Postmarked:		Employee:	
Date Scanned:	01/15/19	Employee:	J. Keyes
Date Data Entered:		Employee:	
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input checked="" type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment

☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
SIMPSON FOR COMMISSIONER		2018 Fourth Quarter			
Start of Election Cycle: January 1, 2018			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 514.68		\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals		<i>(CRO-1205)</i>		\$ 0.00 \$ 150.00	
6) Contributions from Individuals		<i>(CRO-1210)</i>		\$ 0.00 \$ 24,250.50	
7) Contributions from Political Party Committees		<i>(CRO-1220)</i>		\$ 0.00 \$ 0.00	
8) Contributions from Other Political Committees		<i>(CRO-1230)</i>		\$ 0.00 \$ 0.00	
9) Loan Proceeds		<i>(CRO-1410)</i>		\$ 0.00 \$ 500.00	
10) Refunds/Reimbursements to the Committee		<i>(CRO-1240)</i>		\$ 0.00 \$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
11b) Contributions from Not-For-Profit Organizations		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
11c) Outside Sources of Income		<i>(CRO-1250)</i>		\$ 0.00 \$ 0.00	
11d) Legal Expense Fund - Other Sources		<i>(CRO-1270)</i>		\$ 0.00 \$ 0.00	
11e) Exempt Purchase Price Sales		<i>(CRO-1265)</i>		\$ 0.00 \$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)			\$ 0.00		\$ 24,900.50
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		<i>(CRO-1310)</i>		\$ 0.00 \$ 23,599.82	
13b) Contributions to Candidates/Political Committees		<i>(CRO-1310)</i>		\$ 508.68 \$ 758.68	
13c) Coordinated Party Expenditures		<i>(CRO-1310)</i>		\$ 0.00 \$ 0.00	
14) Aggregated Non-Media Expenditures		<i>(CRO-1315)</i>		\$ 6.00 \$ 42.00	
15) Loan Repayments		<i>(CRO-1420)</i>		\$ 0.00 \$ 500.00	
16) Refunds/Reimbursements from the Committee		<i>(CRO-1320)</i>		\$ 0.00 \$ 0.00	
17) In-Kind Contributions		<i>(CRO-1510)</i>		\$ 0.00 \$ 0.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 514.68		\$ 24,900.50
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 0.00		\$ 0.00
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		<i>(CRO-1330)</i>		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns)		<i>(CRO-1430)</i>		\$ 0.00	
22) Debts and Obligations owed by the Committee		<i>(CRO-1610)</i>		\$ 0.00	
23) Debts and Obligations owed to the Committee		<i>(CRO-1620)</i>		\$ 0.00	
24) Account Transfers Within the Committee		<i>(CRO-1720)</i>		\$ 0.00	
25) Administrative Support		<i>(CRO-1710)</i>		\$ 0.00 \$ 0.00	
26) Forgiven Loans		<i>(CRO-1440)</i>		\$ 0.00 \$ 0.00	
27) 48-Hour Notice Reports Submitted		<i>(CRO-2220)</i>		\$ 0.00 \$ 0.00	
28) Contributions to be Refunded		<i>(CRO-1215)</i>		\$ 0.00 \$ 0.00	

Disbursements

Amendment
Pg 1 of 1 ☐ Yes ☒ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)					2. ID Number	
SIMPSON FOR COMMISSIONER						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) FRANK ANKMUS FOR COMMISSIONER 1602 FULLER DR. MONROE, NC 28112				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		
				Union \$ 758.68		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1126	Check	D	12/08/2018	\$ 508.68		
				\$		
5. Total only this Page					\$ 508.68	
6. Total of ALL CRO-1310 Pages						
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 508.68	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* Other						
* Codes require detailed explanation in required remarks field (k)						

CRO-1310

NC State Board of Elections

December 2009

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Union Co. Board of Elections

Aggregated Non-Media ExpendituresPage 1 of 1Amendment
☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable) SIMPSON FOR COMMISSIONER					2. ID Number	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1126	Electric Funds Tran	K	10/22/2018	\$ 3.00	BANK FEE FOR OCTOBER
<input type="checkbox"/> Add <input type="checkbox"/> Remove	1126	Electric Funds Tran	K	11/21/2018	\$ 3.00	BANK FEE FOR NOVEMBER
4. Total only this Page					\$	6.00
5. Total of ALL CRO-1315 Pages (This line must be on line 14 of Detailed Summary Page CRO-1100)					\$	6.00
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		G - Political Party		
I - Postage		J - Penalties		K* - Office Expenses		
O* - Other				Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

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